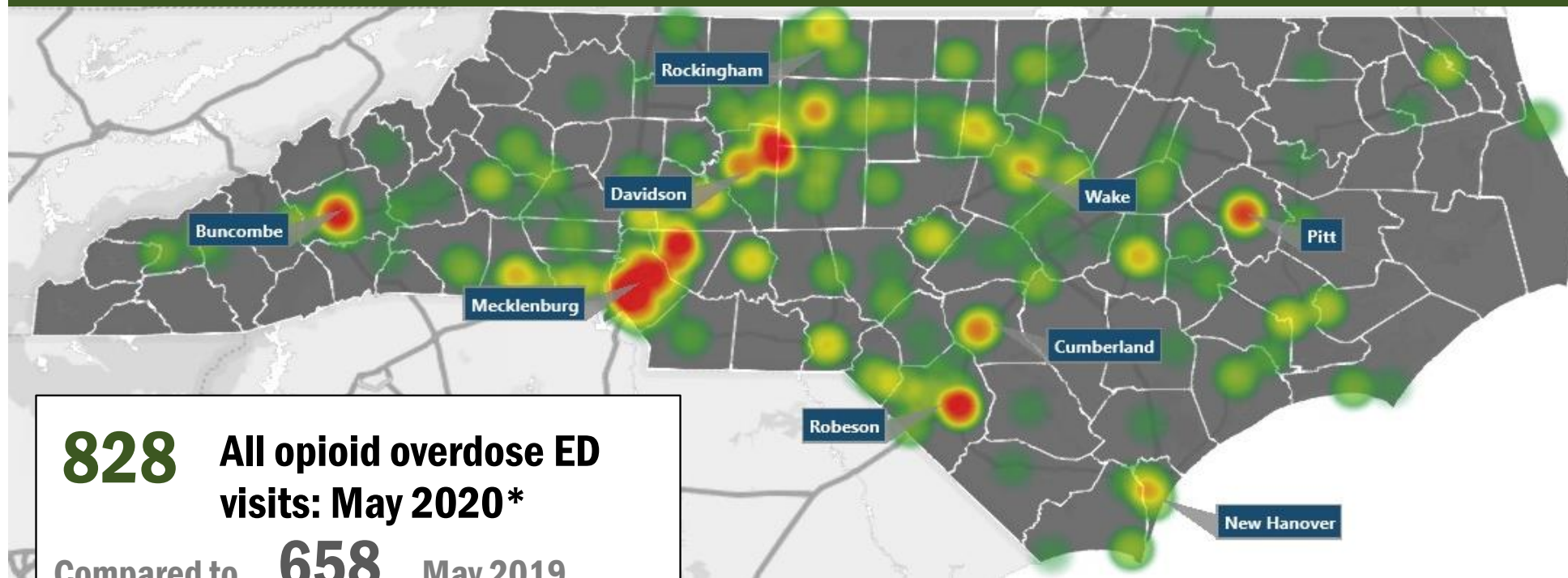


ALL OPIOID OVERDOSE ED VISITS: NORTH CAROLINA, MAY 2020*



828 All opioid overdose ED visits: May 2020*

Compared to **658** May 2019

Data Source: NCDETECT: ED; Custom Event: Overdose: Opioid Overdose V.2 (ICD-9/10-CM)

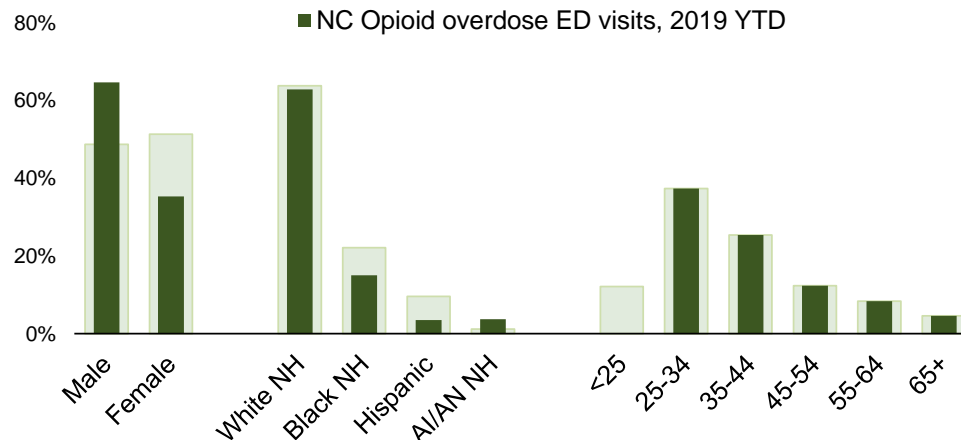
The highest counts by city of residence occurred in:

Mecklenburg, Buncombe, Wake, Guilford, and Durham counties.

The highest rates of visits (≥ 10) per 100,000 residents occurred in:

Robeson (28.8), Richmond (24.5), Rockingham (24.3), Stanly (17.7), and Cleveland (17.4) counties.

■ NC Population Estimates
■ NC Opioid overdose ED visits, 2019 YTD

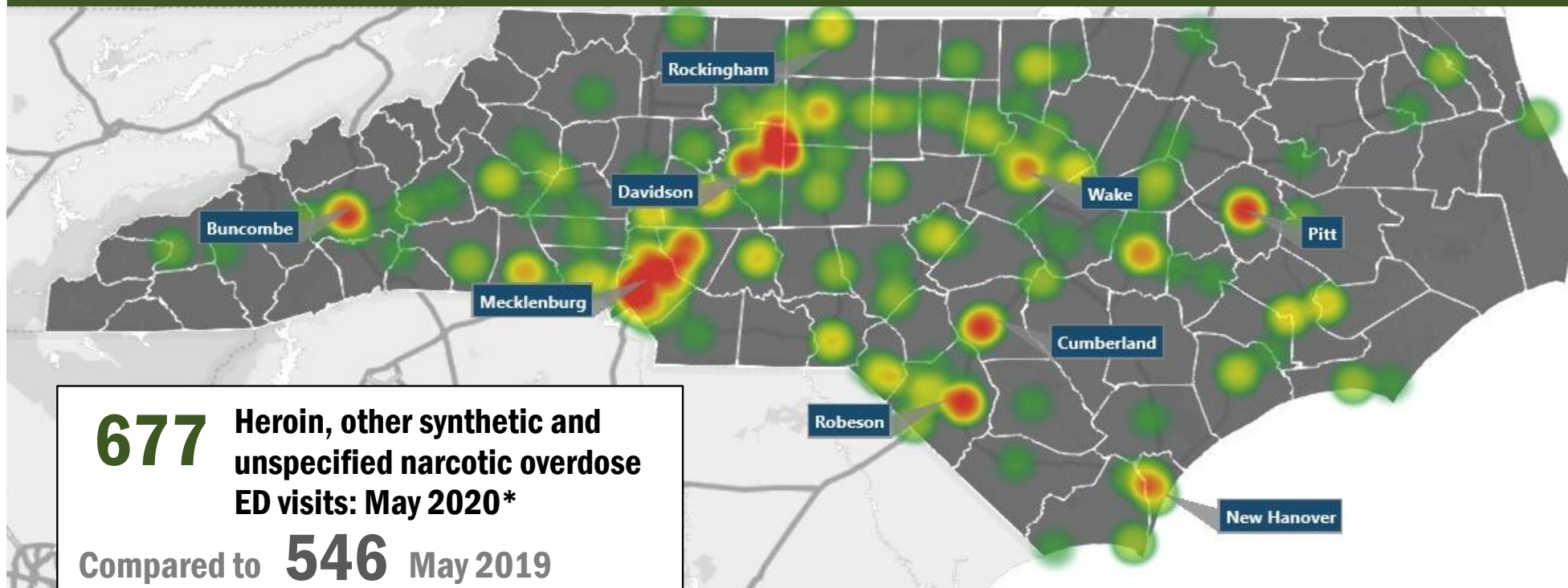


Note: NH(Non Hispanic). Counts based on diagnosis (ICD-9/10-CM code) of an opioid overdose of any intent (accidental, intentional, assault, and undetermined) for North Carolina residents.*Emergency department visit data from NC DETECT are provisional and should not be considered final. There may be data quality issues affecting our counts: counties with <10 cases may not be true lack of opioid overdose cases but data quality issues; additionally, some hospitals use non-specific poisoning codes rather than specific opioid poisoning codes.



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HEROIN AND OTHER SYNTHETIC/ UNSPECIFIED NARCOTIC OVERDOSE ED VISITS, MAY 2020*



677 Heroin, other synthetic and unspecified narcotic overdose ED visits: May 2020*

Compared to **546** May 2019

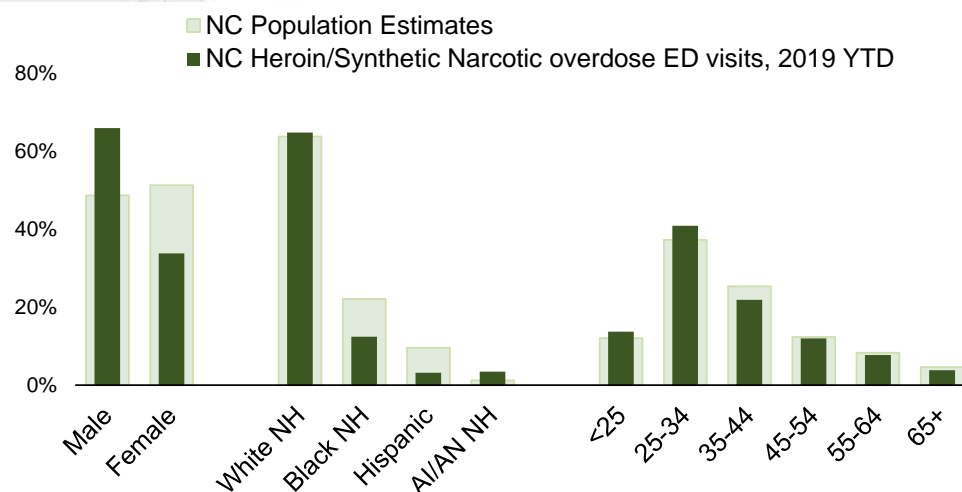
Data Source: NCDETECT: ED; Custom Event: Overdose: Opioid Overdose V.2 (ICD-9/10-CM) searching diagnosis codes for T40.1, T40.4, & T40.6.

The highest counts by city of residence occurred in:

Mecklenburg, Wake, Guilford, Buncombe, and Durham counties.

The highest rates of visits (≥ 10) per 100,000 residents occurred in:

Robeson (22.8), Rockingham (16.5), Davidson (13.8), and Randolph (13.3) counties.



Note: NH(Non Hispanic). Counts based on diagnosis (ICD-9/10-CM code) of a heroin or other synthetic narcotic overdose of any intent (accidental, intentional, assault, and undetermined) for North Carolina residents. *Emergency department visit data from NC DETECT are provisional and should not be considered final. There may be data quality issues affecting our counts: counties with <10 cases may not be true lack of opioid overdose cases but data quality issues; additionally, some hospitals use non-specific poisoning codes rather than specific opioid poisoning codes.



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